CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS FAIR POLITICAL PRACTICES COMMISSOOVER PAGE

MAR 04 2013

SIO CITY CLERK

1. Office, Agency, or Court Agency Name SAN LUIS Obis DO City Council Division, Board, Department, District, if applicable Your Position Council Mender Position: Position: 2. Jurisdiction of Office (Check at least one box) State Multi-County County County County County County County County County County County County County County County County County County County County County County County Cou	Please type or print in ink.	AND AND IN DE	412.22	JLU CITT
1. Office, Agency, or Court Agency Name SAN LUIS Obis D City Council Division, Board, Department, District, if applicable Your Position Your Position Your Position: Position: 2. Jurisdiction of Office (Check at least one box) State State Judge or Court Commissioner (Statewide Jurisdiction) State County of County of County of County of County of County of Annual: The period covered is January 1, 2012, through December 31, 2012. The period covered is Junuary 1, 2012, through December 31, 2012. Assuming Office: Date assumed Intrough December 31, 2012. Assuming Office: Date assumed Intrough Candidate: Election year Intrough Schedule A1 - Investments - schedule attached Schedule B - Real Property - schedule attached Schedule B - Income - Gifts - Schedule attached Schedule B - Real Property - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Travel Payments - schedule attached Schedule B - Income - Gifts - Trav	NAME OF FILER			, ,
Agency. Position. Politing for multiple positions, list below or on an attachment.		Smith	KATHLEEN	MArie
Division, Board, Department, District, if applicable Your Position	1. Office, Agency, or	Court		
Position: Posi	Agency Name		0	
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State	If filing for multiple pos	itions, list below or on an attachment.		
State	Agency:		Position:	
Multi-County County of Other	2. Jurisdiction of Off	ice (Check at least one box)		
Schedule Summary	☐ State		☐ Judge or Court Commissioner (Statewide Jurisdiction)
Statement (Check at least one box) Check at least one box)	Multi-County		County of	
3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2012, through December 31, 2012. -or- The period covered is, through December 31, 2012. Assuming Office: Date assumed, through December 31, 2012. Assuming Office: Date assumed, through December 31, 2012. Assuming Office: Date assumed, through the date of leaving office. Candidate: Election year and office sought, if different than Part 1:	· ·			
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December 31, 2012. The period covered is	3. Type of Statement	(Check at least one box)		
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Leaving office: Date assumed	-or-		·	any 1, 2012, through the date of
the date of leaving office. Candidate: Election year and office sought, if different than Part 1:			unough .	ary 1, 2012, anough the date of
4. Schedule Summary Check applicable schedules or "None." Schedule A-1 - Investments – schedule attached Schedule A-2 - Investments – schedule attached Schedule B - Real Property – schedule attached None - No reportable interests on any schedule Total number of pages including this cover page: Schedule C - Income, Loans, & Business Positions – schedule attached Schedule D - Income – Gifts – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached Total number of pages including this cover page: Schedule C - Income, Loans, & Business Positions – schedule attached Schedule D - Income – Gifts – Travel Payments – schedule attached Total number of pages including this cover page: Schedule C - Income, Loans, & Business Positions – schedule attached Schedule D - Income – Gifts – Travel Payments – schedule attached Total number of pages including this cover page: Schedule C - Income, Loans, & Business Positions – schedule attached Schedule C - Income – Gifts – schedule attached Schedule D - Income – Gifts – Travel Payments – schedule attached Total number of pages including this cover page: Schedule C - Income, Loans, & Business Positions – schedule attached Schedule C - Income – Gifts – Travel Payments – schedule attached Total number of pages including this cover page: Schedule C - Income – Gifts – Travel Payments – schedule attached Total number of pages including this cover page: Schedule C - Income, Loans, & Business Positions – schedule attached Schedule C - Income – Gifts – Travel Payments – schedule attached Total number of pages including this cover page: Schedule C - Income – Gifts – Travel Payments – schedule attached income pages including this cover pages inc	Assuming Office:	Date assumed/		, through
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Schedule A-2 - Investments - schedule attached Schedule B - Real Property - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or- None - No reportable interests on any schedule Nerein and in any attached schedules is true and complete. I ack I certify under penalty of perjury under the laws of the State o		· -	► Total number of pages including this	s cover page: <u>3</u>
Schedule A-2 - Investments - schedule attached Schedule B - Real Property - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or- None - No reportable interests on any schedule I certify under penalty of perjury under the laws of the State o	Schedule A-1 - Inves	stments – schedule attached	Schedule C - Income. Loans. & Bus.	iness Positions – schedule attached
None - No reportable interests on any schedule 5. herein and in any attached schedules is true and complete. I ack I certify under penalty of perjury under the laws of the State of Date Signed 3/5//3				
None - No reportable interests on any schedule 5. herein and in any attached schedules is true and complete. I ack I certify under penalty of perjury under the laws of the State of Date Signed 3/5/3	Schedule B - Real P	Property – schedule attached	Schedule E - Income - Gifts - Trave	el Payments - schedule attached
herein and in any attached schedules is true and complete. I ack I certify under penalty of perjury under the laws of the State of Date Signed				
herein and in any attached schedules is true and complete. I acknowledge to the state of the State of the State of the Signed 3/5/3		☐ None - No repor	table interests on any schedule	
I certify under penalty of perjury under the laws of the State of Date Signed $\frac{3/5}{/3}$	5.			
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(month day year)	Date Signed	(month. day, year)		

SCHEDULE A-1 Investments

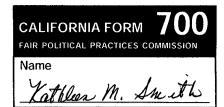
Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

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FAIR POLITION	CAL PRACTICE	S COMMISSI	ION
Name			
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► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Mission Community BANK	P IVAME OF BOSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
<u> </u>	
FAIR MARKET VALUE	FAIR MARKET VALUE
∑ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock ☐ Other	NATURE OF INVESTMENT
(Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
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FAIR MARKET VALUE	FAIR MARKET VALUE
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\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) ☐ Partnership ◯ Income Received of \$0 - \$499	(Describe) Partnership (Describe)
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	· -
Comments:	

SCHEDULE D Income - Gifts



► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
1 Fixit	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
81 Higher St. #200 BUSINESS ACTIVITY, IF ANY, OF SOURCE 54-R.T	PHONECC ACTIVITY IF ANY OF COURSE
BUSINESS ACTIVATY, IF ANY, OF SOURCE 54-BIT 12/18/12 #24.95 Driver Kit	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
, , , , , , , , , , , , , , , , , , , ,	
	\$
\$	\$
	\$
NAME OF SOURCE (Mrs. or Assessing)	
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
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BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
\$	\$
<u></u>	\$
▶ NAME OF SOURCE (Not an Acronym)	➤ NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
32,	
	\$
\$	\$
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Comments:	